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e've been through a tremendously challenging journey these past two years. A journey filled with isolation, loss of routine, fear, uncertainty — the big unknown. But, Californians came together. We were challenged by a pandemic that, in the past year, became the third leading cause of death in the United States. And we faced it with a steadfast vision guided by science — mobilizing one of the most equitable and efficient vaccination programs in the country.

We recognized the toll the pandemic took on us all, with my office and the Centers for Disease Control and Prevention warning of worsening mental health and increasing ACEs as one of the indirect impacts of COVID-19. In response, Governor Newsom and our Legislature made a once-in-a-generation investment in mental and behavioral health.



ACCOMPLISHMENTS COMPLISHMENTS

he COVID-19 pandemic represents the largest public health crisis of this century. It has touched every aspect of the work of the Office of the California Surgeon General (CA-OSG) with significant impacts on the three key areas of focus for CA-OSG: early childhood, health equity, and Adverse Childhood Experiences (ACEs) and toxic stress. While the COVID-19 pandemic itself may not fall within the traditional ACE criteria, it has precipitated a global mental health crisis, deepened inequities in health and opportunity, and led to a substantial increase in ACEs and ACE-Associated Health Conditions. Thus, the Office of the California Surgeon General has been keenly focused on efforts to hasten the end of the pandemic by providing trusted public education, engaging with diverse stakeholders, and supporting statewide efforts to 'Vaccinate All 58' (Vax 58).

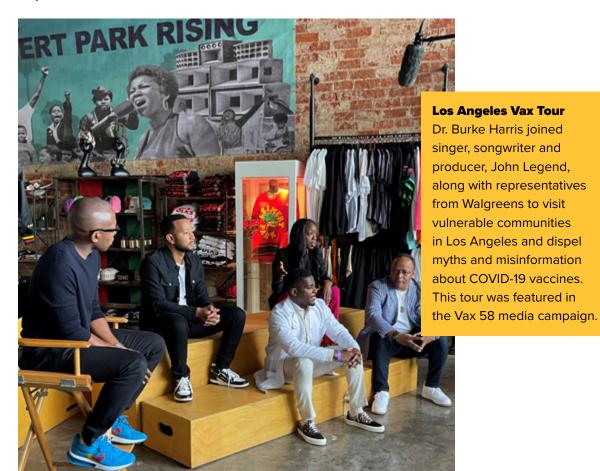
INSPIRING TRUSTED MESSENGERS VIA THE COMMUNITY VACCINE ADVISORY COMMITTEE

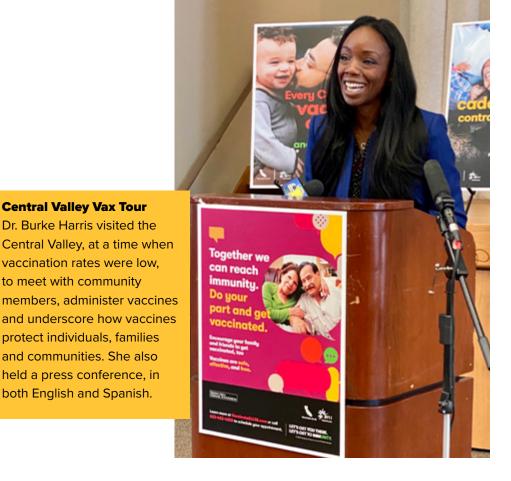
The Community Vaccine Advisory Committee (CVAC) was established in November 2020 to provide input, feedback, and community-based perspectives to California Health & Human Services Agency (CalHHS) and California Department of Public Health (CDPH) on the State's COVID-19 vaccine planning program. Dr. Burke Harris and California State Epidemiologist and Deputy Director of the Center for Infectious Diseases, Dr. Erica Pan, served as cochairs and provided state leadership to this important and influential body. One of its key purposes was to identify gaps and to ensure equity in California's vaccine distribution plan. The committee includes more than 70 organizations representing the diversity of California's many sectors and was one of three external groups which were convened as part of the state of California's plan for administering COVID-19 vaccinations.

Grounded in the values of safety, equity, and transparency, the CVAC worked to provide community stakeholder feedback that helped to ensure that all communities have the benefits of vaccine protection and were on the road to recovery from the direct and indirect effects of the pandemic. The State tackled language barriers; ensured access for Californians with disabilities; and recognized the challenges facing farmworkers, meat and poultry processors, childcare workers, seniors, those in residential facilities, California businesses, educators and more - all represented on the CVAC. The inclusiveness of broad and diverse voices provided by the CVAC were an incredible asset. Although the state was not able to do everything the committee recommended, the input was heard and considered and will inform future systems and processes going forward. This was an extensive effort as the CVAC accomplished this work over 7 months and 15 separate meetings. CA-OSG staff was extensively involved in the preparation for and reporting out of each of the CVAC meetings.

EDUCATING AND INFORMING

Dr. Burke Harris has been a leading voice throughout California's pandemic response—as noted in her efforts to guide the State's equity efforts — but also in her ability to serve as a trusted source of information during a time when misinformation is rampant. When the opportunity arose to meet with communities in-person, Dr. Burke Harris hit the road:





- Bay Area Vaccine Press Conference: Dr. Burke Harris joined California Department of Public Health's State Epidemiologist, Dr. Erica Pan, and Director of the California Department of Public Health and State Public Health Officer, Dr. Tomás Aragón, in March to receive the J&J vaccine and spoke to the media about the safety of the vaccines.
- Los Angeles Vax Tour: Dr. Burke Harris joined singer, songwriter and producer, John Legend, along with representatives from Walgreens to visit vulnerable communities in Los Angeles and dispel myths and misinformation about COVID-19 vaccines. This tour was featured in the Vax 58 media campaign.
- Central Valley Vax Tour: Dr. Burke Harris visited the Central Valley, at a time when vaccination rates were low, to meet with community members, administer vaccines and underscore how vaccines protect individuals, families and communities. She also held a press conference in both English and Spanish.

ANALYZING SECONDARY HEALTH IMPACTS

As the COVID-19 pandemic unfolded, much of the state's efforts has rightly been on reducing direct health impacts of infection. Dr. Burke Harris was also concerned about helping the state project and prepare for potential secondary impacts of the pandemic. There was a recognition that indirect health consequences can be mental (e.g., depression and substance abuse) and physical (e.g., diabetes and cardiovascular disease), as well as intergenerational through increased ACEs and toxic stress. It was also recognized that those who had previously experienced

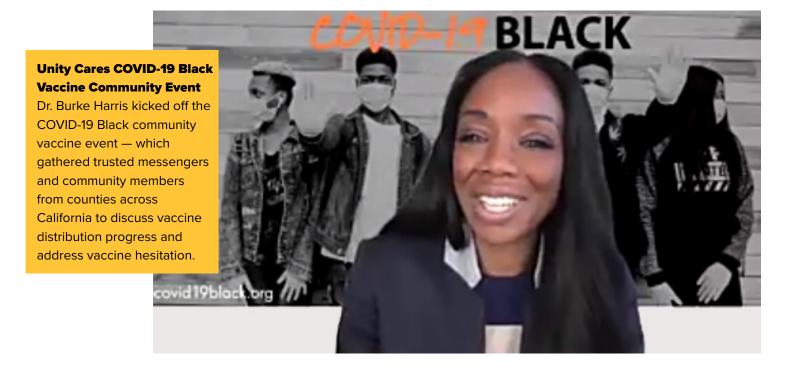
to meet with community

adversity and trauma in their lives would likely be disproportionately affected and at increased risk of negative secondary impacts from the pandemic.

Dr. Burke Harris secured funding from the Stupski Foundation to engage the University of California, San Francisco (UCSF) Philip R. Lee Institute for Health Policy Studies to develop a framework, called RAPID (Rapid Assessment of Pandemic Indirect Impacts and Mitigating Interventions for Decision-making), to:

- Compile and synthesize the best available and relevant scientific evidence on the indirect impact of COVID-19 on health,
- Analyze the added burden due to the pandemic stressors on leading non-COVID-19 causes of disability and death in adults and their offspring,
- Estimate the disproportionate impact of pandemic stressors on adults with a history of exposure to ACEs, and
- Provide economic analyses that support California state decision-making on strategies that mitigate the human suffering and high societal costs resulting from current and downstream indirect health harms from the pandemic.

The final RAPID report was shared in October 2021 with CalHHS and other key partners (including the Governor's Office; California Office of Emergency Services; Business, Consumer Services and Housing Agency; Department of Housing and Community Development). The report is also currently in the process of being posted to the UCSF Institute for Health Policy Studies and CA-OSG websites. The report brought attention to the issue of secondary impacts, developed a novel methodology for analysis, and outlined mitigations that particularly reinforced the significant investments the Administration has made in behavioral health and housing.



ACCOMPLISHMENTS

Advancing Health Equity

he pandemic laid bare the many structural inequities in our society that drive health disparities. Striving for equity in both our society at large and in health care is a critical part of creating a trauma-informed society. Dr. Burke Harris has actively worked to address both the disparate impacts of COVID-19 and the broader structural inequities that exist in our society.

As part of that work, Dr. Burke Harris has met with leaders and staff across the Administration and the California Health & Human Services Agency (CalHHS). Dr. Burke Harris has also facilitated a monthly meeting of Directors to discuss CalHHS equity efforts. That group of CalHHS Directors was also leveraged to provide executive direction to the equity efforts of the Inclusive by Design Team described below and was recently expanded to include representatives from the largest departments within CalHHS.

ADVANCED EQUITY EFFORTS WITH INCLUSIVE BY DESIGN TEAM

Dr. Burke Harris provided executive sponsorship to Inclusive By Design, a cross-department team of staff, as they completed an initial assessment of equity efforts in CalHHS, analyzed strengths and weaknesses within different departments, built a framework to organize intervention opportunities, and then created a memo for CalHHS Secretary Dr. Mark Ghaly with specific recommendations to further equity goals.

All of the recommendations are currently in process of implementation. They include:

- · A data dashboard to advance equity
- Dedicated funding to expand equity training within CalHHS
- Establishment of the Justice, Equity, Diversity, and Inclusion subcommittee of the CalHHS Inter-Departmental Advisory Council
- Naming Department Chief Equity Officers
- Establishing a CalHHS Chief Equity Officer position

The CA-OSG staff have also participated in the Strategic Growth Council's Racial Equity Working Group and jointly presented the Inclusive by Design work to that working group. Strategic Growth Council participants expressed appreciation for the CalHHS Inclusive by Design process and its methodology for engaging staff and leveraging cross-department cooperation.

DISPROPORTIONATE IMPACTS OF COVID-19

The CA-OSG worked in partnership with CalHHS to expand the focus of the LatinX Disparate Impacts Workgroup to more broadly focus on other groups that were experiencing disparate impacts of COVID-19, such as the African-American, Native American, and Asian and Pacific Islander populations. This work would not have



been possible without the support of two other consultants, supported by federal funding dedicated to COVID-19 recovery efforts, who added to the CA-OSG bandwidth. As the pandemic progressed, Dr. Burke Harris worked directly with leadership from the California Department of Public Health (CDPH), CalHHS, and the Governor's Office (GO) to provide critical feedback on the development and display of the COVID-19 equity metric, to allow the state to measure the efficacy of our COVID-19 equity efforts.

VACCINE EQUITY STRATEGY

Dr. Burke Harris and CA-OSG provided executive sponsorship and additional staffing to CalHHS as they led a collaborative effort to determine five actionable recommendations to ensure California's vaccine allocation strategy was equitable and proportional to disease burden:



Allocation. Experts including medical doctors and health equity experts at the Department of Public Health will determine an allocation formula where communities most impacted by COVID-19 receive a disproportionate share of vaccines



Network. The third party administrator (TPA) ensured that the state vaccine provider network includes appropriate access in disproportionately impacted communities and supplements this access with evening/extended hours, transportation services, translation services, home-bound services, mobile vaccine services, and physical accessibility features at vaccination events.



Community Partners. Community based organizations have been providing critical services and information to Californians during the pandemic and are key partners in reaching Californians who have been disproportionately impacted by COVID-19.



Data Analytics. My Turn will be the linchpin of the state's efforts to understand the demographics of vaccine recipients. It continues to feature real-time data analytics to determine how vaccination rates differ between zip code and ethnicity. Health equity experts use the data to adjust and intensify targeted efforts and resource allocations.



Public Education. State will provide consistent messaging through a public education campaign, create in-language content with cultural humility, and meet Californians where they are in order to reach California's diverse populations.

Dr. Burke Harris also worked closely with Blue Shield, California's Third Party Administrator, to ensure equity was tracked, measured and held central in decision-making in California's vaccine distribution strategy.

VACCINE RECOMMENDATIONS ARE WORKING

All of the vaccine distribution recommendations were not only implemented, but have had a significant impact on closing gaps in vaccination rates for many of California's most vulnerable populations.

Since California's reopening on June 15, and as of November 2021, the percentage of the population fully vaccinated in Q1 has increased 42%, while the percentage of Q2 has increased 31%. The number of fully vaccinated Californians in Q1 is closing in on the vaccination rates in Q4. The gap between the most vulnerable zip codes (Q1) and the healthiest (Q4) has narrowed by about 27%.

Vaccine Equity Metric (VEM): 70.3% of VEM 1 and 75% of VEM 2 have received at least 1 Dose of their vaccination series, compared to 77.6% in VEM 3 and 87.8% in VEM 4.

The percentage of vaccines administered to the lower VEM 1, VEM 2 and Latino populations-which are the hardest to reach population segments-have flattened in the past few weeks. As of early October, VEM 4 has become the leading quartile followed by VEM 3, likely due to expanded eligibility for 5+ and boosters.

Out of those eligible for boosters, 25% of VEM 1 has been boosted, 30% of VEM 2, 36% of VEM 3, and 41% of VEM 4.

Race/Ethnicity: There are still disparities in vaccination rates with the Asian population at 98% vaccinated with 1+ dose, White at 72%, Latino at 66%, AIAN at 61%, and Black at 61%. The state is working to address data quality issues impacting vaccination rate estimates for multiracial and NHPI populations.

Ages 5-11: Vaccine administration rates differ by race and ethnicity, with Asian and White populations currently at ~33% and ~16% respectively, and Black and Latino populations at 8% each. Vaccination administration rates also differ by HPI quartile, with HPI Q4 at a vaccination rate ~2.5x higher than HPI Q1.

Unvaccinated vs. Vaccinated: As of November 29, 2021, the risk of COVID cases, hospitalization and death was about 7x, 13x, and 16x higher, respectively, among unvaccinated than vaccinated persons aged 16 years or older.

ACCOMPLISHMENTS

ACES and Toxic Stress

he work of reducing ACEs and toxic stress could not be more important today. The prevalence of ACEs is increasing due to the stressors of the COVID-19 pandemic. In millions of households, children have experienced or are experiencing a surge in stress and adversity. Many lost the stability and safety of schools and daycares, and with them the support of friends, teachers and mentors. Meanwhile, children have lost caregivers to COVID-19, and witnessed parents and other caregivers struggle with the physical, emotional, and psychological and economic distress of COVID-19. A study published in JAMA Psychiatry found that emergency department visit rates related to child abuse and neglect, mental health conditions and intimate partner violence were much higher during the pandemic (March to October 2020), compared to the year before. Addressing ACEs and toxic stress has been a key focus for Dr. Burke Harris.



MORE THAN 500,000 SCREENED FOR ACES

ACEs affect millions of Californians, and the resulting toxic stress is a root cause of many chronic health and societal challenges — from heart disease to homelessness. But with screening and treatment, we can heal from ACEs. The ACEs Aware Initiative, led in partnership with the Department of Health Care Services, provided the funding to move the needle on ACE screening and treatment of toxic stress. More than 20,000 healthcare providers have been trained to screen for ACEs and toxic stress, and more than half-a-million Medi-Cal beneficiaries have been screened.

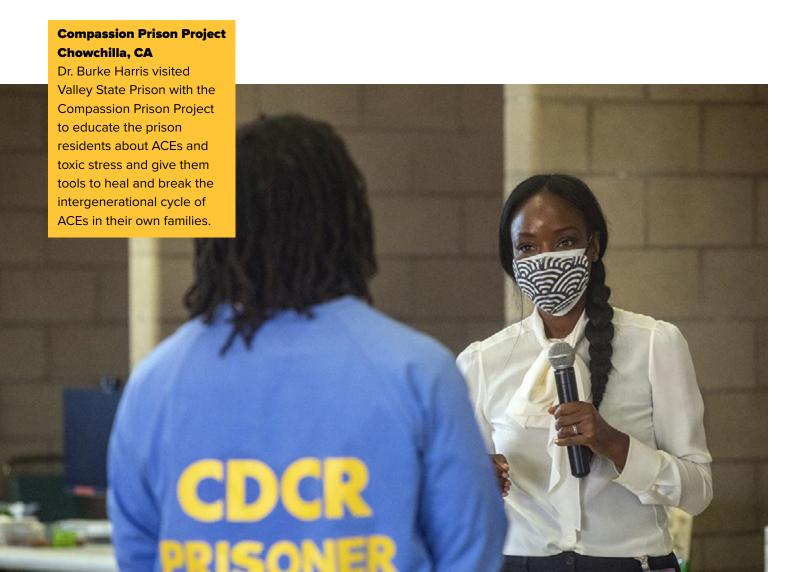
In October 2021, the UCLA/UCSF ACEs Aware Family Resilience Network (UCAAN) was awarded \$41.5 million to bring the highest level of scientific rigor to the state's efforts to address the impact of childhood adversity and toxic stress on health. Together with a substantial network of community partners and a team that includes frontline primary care providers in the state's Medi-Cal network delivery system, UCAAN is expanding ACE screening throughout the state, and developing evidence-based, culturally competent responses to prevent ACEs and treat toxic stress.

SCREENING EXPANDS TO PRIVATE INSURERS

As the Department of Health Care Services continues to fund efforts to train clinicians to screen for ACEs, and reimburses Medi-Cal providers for that screening, the signing of the ACEs Equity Act (SB 428, Hurtado), expands coverage for ACE screening by requiring commercial health care plans and policies issued or renewed after January 1, 2022 that provide coverage for pediatric services and preventive care, to also provide coverage for ACE screenings. This will significantly expand the number of Californians who have access to ACE screenings.

NEXT UP: TRAUMA-INFORMED TRAINING FOR EDUCATORS

We recognize that the COVID-19 pandemic has exacerbated existing mental health challenges that students face, particularly for students who have experienced ACEs, who were already living in poverty and experiencing adversity before the pandemic struck, and for children of color, who have disproportionately experienced the health and economic effects of the twin public health crises of COVID-19 and racism. Educators play a critical role in preventing and interrupting the toxic stress response through daily trauma-informed practices and interventions.





Moderated by writer and producer Wendy Calhoun, the purpose of this event was to raise awareness of the impact of ACEs and toxic stress with the Hollywood community to ensure greater accuracy in stories about childhood trauma.

As part of the Children and Youth Behavioral Health Initiative (CYBHI), the 2021 Budget Act provided \$1 million to the Office of the California Surgeon General (CAOSG) to develop a trauma-informed training curriculum for the education sector, focusing on ages 0 (daycare and preschool) through grade 12. With accreditation by CA-OSG, the curriculum will use standardized language, guidelines, and rigorous scientific evidence to focus on mitigating the long-term harms of ACEs, toxic stress and the disruptions resulting from the COVID-19 pandemic. It will also build off of the Network of Care Roadmap, created by the ACEs Aware Initiative, to help educators understand where they sit in an ecosystem of support for children and youth. Initial planning efforts are underway, including ensuring efficient integration with related efforts at CalHHS, the California Department of Education, and the California Department of Social Services.

DEVELOPING NEW INTERVENTIONS FOR HEALING

As highlighted in the California Surgeon General's report, CA-OSG is committed to guiding cross-sector collaboration to reach its goal of cutting ACEs and toxic stress by half in a generation, including the important work being done at the California Initiative to Advance Precision Medicine (CIAPM) where Dr. Burke Harris serves on the advisory committee. CIAPM funds research to improve current evidenced-based treatment and developing new interventions for healing. In 2021 alone, over \$20 million has been awarded to support precision medicine approaches to assessing and treating ACEs and toxic stress with an aim to improve access, care, and outcomes through collaboration between academic, community, nonprofit, and industry partners.

SOUNDING THE ALARM: EDUCATING AND INFORMING

In 2021, interest in ACEs grew significantly due to the profound impact the pandemic has had on the health and well-being of communities. Dr. Burke Harris reached out via a variety of communications platforms to educate the public about the effects of stress on health, and provide important information on how to recognize stress-related physical and mental health disorders and manage stress.

The CA-OSG was closely engaged in the conceptualization of California's Children and Youth Behavioral Health Initiative (CYBHI), drawing attention to the need for robust public education efforts and the importance of maintaining a focus on prevention. Additionally, CA-OSG leveraged countless opportunities to sound the alarm on children's mental health and wellbeing and highlight the Governor's \$4.4 billion investment in CYBHI. Dr. Burke Harris was interviewed at state, national and global levels where she discussed COVID-19, the trauma caused by the pandemic, and the efforts of the Newsom administration to build back better. She spoke with CNN, Today Show, Washington Post, New York Times, Vogue and dozens of media outlets throughout California.

Stakeholder Engagement: Dr. Burke Harris was very active in engaging with stakeholder groups to educate, inform and answer questions. This included town hall meetings in English and Spanish (most recently with Speaker Nancy Pelosi), testimony for the Little Hoover Commission, meetings with philanthropic partners, and delivering the keynote address at the United Nations Summit to End Violence Against Children.

The CA-OSG also worked with numerous partners to lift up their outreach and education. This included reviewing content when asked and amplifying campaigns on CA-OSG social channels. Dr. Burke Harris also collaborated on an array of public service announcements.

Milken Institute Global Conference | Starting Local: Philanthropy Tackles Community Mental Health

Dr. Burke Harris joined Andy Keller, President and CEO of the Meadows Mental Health Policy Institute, and Yolanda Lewis, Senior Director of Safety and Justice at The Pew Charitable Trusts, to speak on a panel about the importance of community mental health and the role of philanthropy in driving forward solutions that scale.



CA-OSG Outreach Campaign Collaborations:

- Vax 58
- California Department of Public Health
- Listos
- CalHOPE
- ACEs Aware
- ACE Resource Network's NumberStory
- California Court Appointed Special Advocate Association (CASA)
- Safely Open Schools Now Partnership

STATE OF CARE ACES AWARE PROVIDER EDUCATION CAMPAIGN

The CA-OSG played an integral role in the State of CAre ACEs Aware digital campaign. Funded by the ACEs Aware Initiative, the primary goal of the campaign was to drive Medi-Cal providers to complete the ACEs Aware training and become certified to screen for ACEs. The campaign used strategic media partners to promote targeted ads on various digital platforms, and includes a video PSA from Dr. Burke Harris. The campaign also distributed consumer-facing educational materials to 90,000 providers across the state, along with a letter signed by Dr. Burke Harris promoting the ACEs screening and treatment for toxic stress.



Children & Youth Mental
Health Roundtable with U.S.
Surgeon General Dr. Murthy

Dr. Burke Harris joined U.S. Surgeon General, Dr. Vivek Murthy, to discuss a recent Advisory to highlight the urgent need to address the nation's youth mental health crisis and uplift actionable solutions taking place in California to stem the crisis.

ACCOMPLISHMENTS

Childhood Development

r. Burke Harris' dedication to improving early childhood development is in direct alignment with her work to prevent and heal the long-term impacts of ACEs and toxic stress.

In 2021, Dr. Burke Harris closed out her time as Chair of the **Early**Childhood Policy Council, where she was able to align the work of the council to provide recommendations and inform the Master Plan for Early Learning and Care.





In January, she was appointed as Chair of the **First 5 California** Commission. In that role, she has centered equity and ACEs-informed approaches in First 5's communications, strategic planning and grant-making. She has also pressed First 5 leadership to ensure their approaches and interventions are evidence-based.

Her influence on the work of First 5 California is evident in the recently confirmed North Star Statement, which will help guide and prioritize current and future projects and investments: "Trauma-informed, healing-centered, and culturally responsive systems promote the safe, stable, nurturing relationships and environments necessary to eliminate inequities and ensure healthy development for all children."

Recently, Dr. Burke Harris presented to the cross-sector **Preschool Development Grant State Stewardship Team** to share resources and provide an ACEs and trauma-informed perspective to guide their ongoing work in this area.

In 2022, CA-OSG will be rolling out trauma-informed training for educators as part of a larger initiative to enhance buffering support for children in early childhood.

e have been given a profound opportunity to build a healthier and more equitable society. While we're proud of the progress to date, our hope is that the work we've been doing is just the beginning of the story. We are excited for what's to come in 2022.



